

## **245.80B**

# **Water-Testing Summary**

## **Overview**

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### **Introduction**

A copy of the form, Water-Testing Summary, is printed on the following page.

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## Water-Testing Summary

Agency Name/Number:	Date:
Completed by:	

<i>Number of participants referred to sanitarian for sampling</i>		
	<b>County Well Program</b>	<b>Other Entities</b>
Pregnant women		
Breastfeeding women		
Not Breastfeeding women		
Infants		
Children		

<i>Results</i>		
	<b>County Well Program test results</b>	<b>Test results collected by any other entity</b>
Safe		
Bacteria Only		
Nitrate Only		
Both bacteria and nitrate		
Rejected as being too old		
Unknown		

<i>Follow-up for positive results</i>		
	<b>County Well Program Sample</b>	<b>Other entity sample</b>
Contacted healthcare provider		
Contacted county sanitarian		
Participant boils water		
Participant purchases water		
Participant brings water from town		
Unknown		

Comments: